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## BIB DATA SHEET

CONFIRMATION NO. 3548

<b>SERIAL NUMBER</b> 10/531,552	<b>FILING or 371(c) DATE</b> 11/08/2005 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1617	<b>ATTORNEY DOCKET NO.</b> 9516-075-999	
<b>APPLICANTS</b> Jerome B Zeldis, Princeton, NJ; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/US03/11324 04/13/2003 * which claims benefit of 60/418,470 10/15/2002 (*)Data provided by applicant is not consistent with PTO records. <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b>					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /TIMOTHY E BETTON/ Acknowledged Examiner's Signature	<input type="checkbox"/> Met after Allowance TEB Initials	<b>STATE OR COUNTRY</b> NJ	<b>SHEETS DRAWINGS</b> 0	<b>TOTAL CLAIMS</b> 37	<b>INDEPENDENT CLAIMS</b> 13
<b>ADDRESS</b> JONES DAY 222 EAST 41ST ST NEW YORK, NY 10017 UNITED STATES					
<b>TITLE</b> Method of using and compositions comprising selective cytokine inhibitory drugs for the treatment and management of myelodysplastic syndromes					
<b>FILING FEE RECEIVED</b> 6190	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		